CAMPAIGN CONT	RIBUTIONS	AND EXPENSES REPOR	RT State	of Nevada
Steve L. Dob		District Court		Seventh
Name (print) P.O. Box 151	597	Office (if applicable) Ely, NV 89301	775-289	istrict (if applicable)
Mailing Address (include city and dobrescu@mwp	zio code)	DITY NO 05301	Telephone No.	-4013
E-Mail Address	Ower . Hec	· · · · · · · · · · · · · · · · · · ·	<u> </u>	
Select Appropriate Box(es) [X]	CANDIDATE   PAC	□BAG □POLPRTY □IND €)	(P/Tablesinen (T) a	ikurai cu kie
			*: <del> **********************************</del>	WILLIAM FILLIAGO
Annual Filing - Due January 15, 2004 Period: January 1, 2003 - December 31, 2003				<del></del>
•	,			:
Report #1 — Due August 31, 2004			FILL	
ncumbents in an Office with a 4- ncumbents in an Office with a 6-	year term Period: year term Period:	Jan. 5, 2001 — Aug 26, 2004 Dec. 20, 1998 — Aug 26, 2004		o . Anna
VII others	Period	Jan. 1, 2004 – Aug. 26, 2004	JAN	6 % (A)
Ballot Advocacy Groups (BAG)	s) only: Period:	Dec. 5, 2002 - Aug 26, 2004		AULER
Report #2 Due	— October 26, 2		( DOEAN	FICE USE ONLY
	Period:	Aug. 27, 2004 — Oct. 21, 2004	SECHANO	TIGE GGE GREET
Report #3 Due	January 15, 2 Period:	005* Oct. 22, 2004 Dec. 31, 2004	<i>a</i> 1 -	1 -
BAGs only:	Period:	Oct. 22, 2004 - Dec. 5, 2004 Oct. 22, 2004 - Dec. 5, 2004	ANCA	N 530
Annual Filino –	Due January 15	. 2005	, 7	-
Period: January 1	. 2004 - Decembe	r 31, 2004	_	
manu report suffices for	2000 Annual Filir	ig if candidate also filed Report N	os. 1 and 2	
				Cumulativa
CONTRIBU	JTIONS SUMM	ARY		Prom Beginning of Report Period
			This Period	#1 through End of This
				Reporting Period
Total Monetary Cont	ributions Received in	Excess of \$100	0	
Total Monetary Contributions Received of \$100 or Less			0	
		Due Period Cumulative Fr	Nation 1	
		Beginning of Report Period		
		Through End o	1	
3 Total Amount of Mo	neten Contillina	Period		•
<ol> <li>Total Amount of Mo Received</li> </ol>	merary Countibution	18		
(Add Lines 1 and 2) 4. Total Value of In Kind Contributions Received in			0	
Excess of \$100	J Contributions Recei	ved in		
		<del> </del>	<del></del>	
	1	XPENSES SUMMARY		
5. Total Monetary Expenses Paid in Excess of \$100			0	
6. Total Monetary Expenses Paid of \$100 or Less			0	
7. Total Amount of All (Add Lines 5 and 6)	7. Total Amount of All Monetary Expenses Paid			
Total Value of In Kind Expenses in Excess			0	
of \$100			<del></del>	
			***************************************	000,000,000
		AFFIRMATION		
Declare Under Penalty of Pe	erjury That the Fore	egoing is True and Correct.		
$C\Delta I$			1 .	
XIXL		/	12/211	
<u>U'U</u>	<del></del> -		7/07	
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Revised: Oct-03

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